

## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece.



Herbert Johnson, Sheriff  
Autauga County Metro Jail  
136 North Court Street  
Prattville, AL 36067

## COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)

P. McLAUGHLIN

B. Date of Delivery

9-15-06

C. Signature

P. McLaughlin

☐ Agent☐ AddresseeEvery address different from item 1? ☐ YesEnter delivery address below: ☐ No

3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

0485

102595-00-M-0952

**SENDER: COMPLETE THIS SECTION**  
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  
■ Print your name and address on the reverse so that we can return the card to you.  
■ Attach this card to the back of the mailpiece,

1  
Warden Attison  
Autauga County Metro Jail  
136 North Court Street  
Prattville, AL 36067

**COMPLETE THIS SECTION**  
OF THE RETURN TO TOP OF ENVELOPE

A. Received by (Please Print Clearly) J. McLaughlin B. Date of Delivery 7-15-06  
C. Signature J. McLaughlin ☐ Agent ☐ Addressee  
Address different from item 1? ☐ Yes ☐ No  
Delivery address below. ☐ Yes ☐ No  
Box 814  
Prattville

3. Service Type  
☒ Certified Mail ☐ Express Mail  
☐ Registered ☒ Return Receipt for Merchandise  
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Copy from serv.) 7005 1820 0002 3461 6555  
PS Form 3811, July 1999 Domestic Return Receipt 102595-00 M-0952

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

████████████████████  
Ma Ellis, Nurse  
Tauga County Metro Jail  
16 North Court Street  
Battville, AL 36067

**COMPLETE THIS SECTION ON DELIVERY**

A. Received by (Please Print Clearly)

B. Date of Delivery

*P. McLaughlin*

*9-15-06*

C. Signature

☒ X

*P. McLaughlin*

☐ Agent

☐ Addressee

D. Is delivery address different from item 1?

☐ Yes

☐ No

If YES, enter delivery address below:

*Alcov St 4  
provincy*

Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☒ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number (Copy from service label)

7005 1820 0002 3461 0492

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952